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CONFIRMATION NO. 1802

<b>SERIAL NUMBER</b> 10/791,314	<b>FILING OR 371(c) DATE</b> 03/01/2004 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2611	<b>ATTORNEY DOCKET NO.</b> 030213
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/506,466 09/25/2003 *ML 5/9/2007*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*— NONE — ML 5/9/2007*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
05/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 42	<b>INDEPENDENT CLAIMS</b> 12
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>ML</i>				

**ADDRESS**  
23696

## TITLE

Hierarchical coding with multiple antennas in a wireless communication system *ML*

<b>FILING FEE RECEIVED</b> 1940	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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